

Exhibit O

GENERAL INFORMATION**PERSONAL DATA**

| | | | |
|---|--|----------------------|------------------------|
| NAME (LAST) Harris | (FIRST) Jennifer | (MI) R. | SOCIAL SECURITY NUMBER |
| PRESENT ADDRESS (NO., STREET, AND APARTMENT NO.) 4704 Towne Main Dr Apt 1923 | | FROM (MO., DAY, YR.) | |
| CITY Plano | STATE TX | ZIP CODE 75024 | |
| TELEPHONE (AREA CODE AND NUMBER) (817) 938-5856 | ALTERNATE PHONE (AREA CODE AND NUMBER) (817) 938-5856 | | |
| EMAIL ADDRESS jharrismk04@yahoo.com | ALTERNATE EMAIL ADDRESS jharrismk04@yahoo.com | | |

IS ANY ADDITIONAL INFORMATION RELATIVE TO A CHANGE IN YOUR NAME NECESSARY TO ENABLE FEDEX SERVICES TO VERIFY THE INFORMATION IN THIS APPLICATION OR OBTAINED IN CONNECTION WITH IT?

YES NO

IF YES, OTHER NAME(S) _____

POSITION APPLIED FOR

MINIMUM SALARY REQUIRED PER MONTH
2,500

1. HAVE YOU EVER AT ANY TIME WORKED WITH, OR BEEN PREVIOUSLY EMPLOYED BY ANY OF THE FOLLOWING COMPANIES IN THE PAST? IF SO, PLEASE STATE THE COMPANY NAME(S), DATE(S) OF APPLICATION AND/OR EMPLOYEMENT AND EMPLOYEE NUMBER(S), IF ANY.

FEDEX SERVICES, FEDEX CORPORATION (FDX), FEDEX EXPRESS, FEDEX GROUND (RPS), FEDEX FREIGHT (VIKING FREIGHT, AMERICAN FREIGHTWAYS), FEDEX CUSTOM CRITICAL (ROBERTS FREIGHT), FEDEX TRADE NETWORKS, OR FEDEX SUPPLY CHAIN SERVICES, FEDEX KINKO'S.

NO YES, COMPLETE BELOW

| | | | | |
|----------------|-----------------|-------------------------|--------------|-------------|
| COMPANY: _____ | LOCATION: _____ | APPLIED/EMPLOYED: _____ | DATES: _____ | ID #: _____ |
| COMPANY: _____ | LOCATION: _____ | APPLIED/EMPLOYED: _____ | DATES: _____ | ID #: _____ |
| COMPANY: _____ | LOCATION: _____ | APPLIED/EMPLOYED: _____ | DATES: _____ | ID #: _____ |

NOTE: THE FEDEX FAMILY OF COMPANIES SHARE EMPLOYMENT INFORMATION. HOWEVER, THE COMPANIES DO NOT SHARE ANY EMPLOYMENT INFORMATION (INCLUDING MEDICAL INFORMATION) THAT IS OTHERWISE PROHIBITED OR LIMITED FROM BEING SHARED BY LAW. BY COMPLETING AND SUBMITTING THIS EMPLOYMENT APPLICATION, YOU AUTHORIZE FEDEX SERVICES TO SHARE APPROPRIATE INFORMATION.

2. ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES?

YES NO

3. IN THE LAST 10 YEARS (7 YEARS IN CA, CO, KS, MA, MD, NH, NV, NY, TX, and WA), HAVE YOU BEEN CONVICTED OF OR PLEADED GUILTY TO A CRIME OR OTHER OFFENSE?

YES NO

Include military service convictions, DUI, guilty pleas and pleas of nolo contendre (no contest). Do not include other traffic violations, parking tickets or convictions or guilty pleas for which a record has been sealed or expunged. NOTE: A conviction is NOT an automatic bar to employment. Individual circumstances will be considered.

IF YES TO ANY OF THE ABOVE, YOU MUST PROVIDE:

DATE AND PLACE OF THE CONVICTION OR GUILTY PLEA _____

ORIGINAL CHARGE AND FINAL CHARGE, IF DIFFERENT _____

4. ARE YOU PRESENTLY UNDER CHARGES, UNDER INDICTMENT OR ARE YOU CURRENTLY A DEFENDANT IN ANY CRIMINAL PROCEEDING?

YES NO

IF YES, STATE THE CHARGE _____

DATE OF THE INDICTMENT OR PENDING CHARGE _____

CITY AND STATE OF THE INDICTMENT OR PENDING CHARGE _____

NOTE: A Yes answer to this question is NOT an automatic bar to employment.

5. NOTE: THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. ANY MISREPRESENTATION OR OMISSION OF ANY FACT IN MY APPLICATION, RESUME, OR ANY OTHER MATERIALS SUBMITTED TO THE COMPANY OR DURING MY INTERVIEWS MAY RESULT IN DENIAL OF EMPLOYMENT OR DISCHARGE.

Jennifer Harris

4/16/2007

ELECTRONIC SIGNATURE

DATE

WORK HISTORY

| P R E S E N T I L A S T | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
|--|--|---------------------|--------------------------|-------------------------|-------------------|
| | MM/DD/YY 02/2005 | MM/DD/YY Present | Virtual Sales Rep | Cingular Wireless | YEARLY 45,000 |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) Tami Stine Manager | | | PHONE 214-5054651 | |
| | ADDRESS 5601 Legacy Dr | | CITY Plano | STATE Texas | ZIP CODE 75024 |
| | DESCRIPTION OF DUTIES Converted sales leads to eligible offers of wireless service. | | | | |
| | REASON FOR LEAVING No room for growth in the company. | | | | |
| P R I O R I R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY 10/1999 | MM/DD/YY 04/2005 | Sales Associate | The Gap Inc. | YEARLY 15,000 |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) Chi He Store Manager | | | PHONE 817-292-7291 | |
| | ADDRESS Fort Worth - Dallas Area | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES Effectively identified customers needs and provided information about the benefits of our products. | | | | |
| | REASON FOR LEAVING No room for growth in the company. | | | | |
| P R I O R I R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY 05/2000 | MM/DD/YY 08/2000 | Customer Service Rep | Arlington Star-Telegram | YEARLY 5,300 |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) Debbie Long Manager | | | PHONE 817-548-5400 | |
| | ADDRESS 1111 W. Abram | | CITY Arlington | STATE Texas | ZIP CODE 76013 |
| | DESCRIPTION OF DUTIES Provided detail information to the customers, prospects, and reporters. | | | | |
| | REASON FOR LEAVING Intern | | | | |
| P R I O R I R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY 08/1997 | MM/DD/YY 08/2000 | Administrative Assistant | Allstate Insurance | YEARLY 6,700 |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) Brooke Townsend | | | PHONE 817-361-0880 | |
| | ADDRESS 6219 Granbury | | CITY Fort Worth | STATE Texas | ZIP CODE 76133 |
| | DESCRIPTION OF DUTIES Assembled customer portfolios to provided accurate policy information. | | | | |
| | REASON FOR LEAVING School | | | | |
| P R I O R I R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | PHONE | |
| | ADDRESS | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES | | | | |
| | REASON FOR LEAVING | | | | |
| P R I O R I R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | PHONE | |
| | ADDRESS | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES | | | | |
| | REASON FOR LEAVING | | | | |

| | | | | | |
|-----------------------|---|----------|-----------|--------------|----------|
| P R I O R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | | PHONE |
| | ADDRESS | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES | | | | |
| REASON FOR LEAVING | | | | | |
| P R I O R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | | PHONE |
| | ADDRESS | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES | | | | |
| REASON FOR LEAVING | | | | | |
| P R I O R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | | PHONE |
| | ADDRESS | | CITY | STATE | ZIP CODE |
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| REASON FOR LEAVING | | | | | |
| P R I O R | FROM | TO | JOB TITLE | COMPANY NAME | SALARY |
| | MM/DD/YY | MM/DD/YY | | | YEARLY |
| | SUPERVISOR'S FULL NAME AND TITLE (IF APPLICABLE, OR OTHER PERSON WHO CAN CONFIRM THIS ACTIVITY) | | | | PHONE |
| | ADDRESS | | CITY | STATE | ZIP CODE |
| | DESCRIPTION OF DUTIES | | | | |
| REASON FOR LEAVING | | | | | |

EDUCATION (Please (x) degrees/diplomas you have completed and provide requested information for each.)

| | | | | | |
|--|-----------------------------------|--------------------------------|--------------------|--------------------|----------------|
| RECEIVED: | H.S. Diploma | MAJOR N/A | | | |
| | | SCHOOL Paul Laurence Dunber | | CITY Fort Worth | STATE Texas |
| ASSOCIATE DEGREE COMPLETED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | MAJOR | Credit Hours Completed | FROM | TO | |
| | SCHOOL | | CITY | | STATE |
| BACHELOR DEGREE COMPLETED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | MAJOR Marketing | Credit Hours Completed | FROM 08/1999 | TO 05/2004 | |
| | SCHOOL Angelo State University | | CITY San Angelo | | STATE Texas |
| MASTERS DEGREE COMPLETED <input type="checkbox"/> YES <input type="checkbox"/> NO | MAJOR | Credit Hours Completed | FROM | TO | |
| | SCHOOL | | CITY | | STATE |
| DOCTORATE DEGREE COMPLETED <input type="checkbox"/> YES <input type="checkbox"/> NO | MAJOR | Credit Hours Completed | FROM | TO | |
| | SCHOOL | | CITY | | STATE |
| CERTIFICATE OF COMPLETION <input type="checkbox"/> YES <input type="checkbox"/> NO | MAJOR | Credit Hours Completed | FROM | TO | |
| | SCHOOL | | CITY | | STATE |
| CERTIFICATE OF COMPLETION <input type="checkbox"/> YES <input type="checkbox"/> NO | MAJOR | Credit Hours Completed | FROM | TO | |
| | SCHOOL | | CITY | | STATE |

FOREIGN LANGUAGE

Please list which foreign languages you speak, read, or write. (Information will be used for job-related purposes only.)

SPEAK READ WRITE

| | | |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PROFESSIONAL CERTIFICATIONS OR LICENSES

EMPLOYMENT AGREEMENT**IMPORTANT - PLEASE READ AND SIGN**

If employed, in consideration thereof, the continuance thereof, he compensation paid therefore, and without further consideration, I do hereby agree:

(1) That by execution of this application, I acknowledge that FedEx Corporate Services (hereinafter referred to as "Company") has disclosed to me that an Investigative Consumer Report including information as to my character, general reputation, personal characteristics, and mode of living may be made; and that I, upon written request to the Company, made within a reasonable time after the date of this application, may obtain a complete and accurate disclosure of the nature and scope of the investigation requested, if any.

(NOTE: When required by state law, applications, upon written request, will also be provided with the name and address of the consumer reporting agency to whom the Company's request to procure a report was made, and may also inspect and receive a copy of this report by contacting this agency. Applicants in California will be informed by the Company if an investigative consumer report is requested, which will include the name of the agency preparing the report and summary of their rights under California law.)

(2)(a) That any and all intellectual property, including without limitation, all inventions, discoveries, works of authorship, patentable works, copyrightable works, trade secrets, ideas and software and all materials related to any of them, and all improvements thereto, (collectively "Intellectual Property") in any way relating to the business of the character now or hereafter carried on or contemplated by the Company or to the processes of the Company, or to apparatus adapted to the business of processes of the Company, discovered, conceived, created, prepared, or made by me, individually, or jointly with others, during my employment, regardless of whether I am involved in such line of work or investigation, shall immediately be disclosed to the Company, shall be considered prepared for and on behalf of the Company, considered a work for hire, and immediately become absolute property of the Company. I hereby assign all my right, title and interest in and to all such Intellectual Property, including without limitation, letters patent, copyrights, shopright and all other common law and statutory evidences of possession or ownership of such Intellectual Property in and by the Company, its successors, and assigns, including the right to apply for and obtain such letters patents, copyrights and other common law and statutory protections in all countries as Company may select. I further agree to assist the Company in making application for such letters patent, copyrights, and all other common law and statutory protections for such Intellectual Property as the Company may consider desirable to perfect the Company's title to and interest in such Intellectual Property and to sign and execute any and all further papers necessary and incident to the perfection of Company's ownership of the Intellectual Property and the filing and protection of such protections, the Company to bear the costs and expense incident hereto. I will at any and all times cooperate with the Company in the prosecution and defense of any litigation which may arise in connection with any of the foregoing, and agree that termination of my employment will not relieve me of any of the above stated obligations.

(b) I agree that should I, in the course of my employment, acquire any information which is confidential or proprietary to the Company, I will at all times during and after my employment with the Company (i) hold such information in confidence; (ii) not disclose nor communicate confidential information to any third party; and (iii) not make use of such information on my behalf or any third party. I acknowledge that an unauthorized disclosure of confidential information would cause irreparable harm to the Company and the Company shall be entitled to obtain appropriate relief should I violate this provision.

(3) That the Company may request, and I also authorize and request each former employer and each person, firm, or corporation given above as reference to furnish any information that may be sought by the Company concerning me and my work habits, character and skill, and I hereby waive any privileges involved and I hereby release my former employers from any and all liability of any type as a result of providing such information to the Company.

(4) That I may be subjected to searches of my person or property as a condition of employment. I further agree to permit employment searches as outlined in the Company's security policies and acknowledge that should I refuse to permit an employment search, I may be terminated.

(5) That at any time in the future, whether during or after termination of my employment, the Company has my consent to furnish any and all (i) reports (ii) information gathered and (iii) information relative to my record and services with and termination from the Company. I hereby release the Company from any and all liability of any type as a result of disclosing such information to another company or any third party, including release of information to any of the FedEx family of companies, that is not prohibited by law.

(6) As part of the pre-employment process, drug testing may be required. I understand that for such positions, any job offer is contingent upon successfully passing any such test. I agree to provide access to previous medical records if required.

(7) That I will submit myself to medical examinations, and/or health monitors, which may, under appropriate circumstances, include testing for drugs and/or alcohol, by physicians of the Company's selection as often as requested during my employment, and understand that failing to pass any such examination may prevent me from being in the Company's service; and I further understand and agree that failure of the Company to request physical examination shall not be construed as an admission by the Company that I am physically qualified to perform any specific type of service.

(8) Any offer of employment will be contingent upon the applicant's qualification for bond if required for the specific position.

(9) That Company, its parent, subsidiaries and successors and their respective employees, servants, agents, and independent contractors may include in any publication, advertising, testimonial, or other material published or distributed during and after my employment, reproductions made by any means, of my name, likeness, voice and testimonial, without my further consideration, consent or review. That Company shall own and I hereby assign to the Company all rights whatsoever in any such reproductions produced during my employment.

(10) The Company is subject to and is operating under various state workers' compensation laws and that in case of injury, I will accept compensation as provided by said laws.

(11) That during the term of my employment, which I understand is INDEFINITE IN DURATION, I will comply with the guidelines established in the Company's policies, rules, regulations, and procedures. I acknowledge and agree that the Company has the absolute, unfettered right to change its policies, rules, regulations, and procedures unilaterally, at any time, without prior notice. I ALSO AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE AND WITHOUT NOTICE OR LIABILITY WHATSOEVER, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I FURTHER UNDERSTAND THAT NO MANAGER OR REPRESENTATIVE OF THE COMPANY, OTHER THAN THE CEO, OR ANY SENIOR VICE-PRESIDENT DESIGNATED BY THE CEO, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT WITH ME FOR ANY SPECIFIED PERIOD OF TIME OR TO AMEND THIS AGREEMENT IN ANY MANNER. MOREOVER, ANY SUCH AMENDMENTS SHALL BE IN WRITING. NOTHING IN THIS AGREEMENT, NOR ANY DOCUMENTATION OR OTHER COMMUNICATION FROM THE COMPANY, SHALL AFFECT MY EMPLOYMENT AT WILL STATUS.

(12) I FULLY UNDERSTAND MY AT-WILL EMPLOYMENT STATUS, AND I AGREE AND UNDERSTAND THAT I MUST USE THE APPROPRIATE COMPANY POLICIES AND DISPUTE RESOLUTION PROCEDURES TO RESOLVE MY WORK-RELATED COMPLAINTS AND ANY OTHER CONTROVERSY ARISING OUT OF MY EMPLOYMENT OR THE TERMINATION OF MY EMPLOYMENT. I UNDERSTAND THAT THE COMPANY CANNOT GUARANTEE FAIR OR PARTICULAR RESULTS SINCE EVERYONE'S CONCEPT OF FAIRNESS DIFFERS. THE EXCLUSIVE REMEDY AS TO ALL DISPUTES AND THE DECISIONS RESULTING FROM USE OF THESE POLICIES WILL BE FINAL AND BINDING ON THE COMPANY AND ME. THE COMPANY GUARANTEES ME AN OPPORTUNITY TO ACCESS COMPANY POLICIES AND PROCEDURES FOR ALL DISCRIMINATION ISSUES.

(13) I FURTHER UNDERSTAND THAT AS A RESULT OF MAKING THIS APPLICATION FOR EMPLOYMENT, MY CRIMINAL RECORDS MAY BE EXAMINED BY THE COMPANY OR ITS AGENTS. I HEREBY AUTHORIZE THE COMPANY OR ITS DESIGNATED AGENTS TO MAKE ANY LAWFUL EXAMINATION OF MY CRIMINAL RECORD.

(14) THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. ANY MISREPRESENTATION OR OMISSION OF ANY FACT IN MY APPLICATION, RESUME, OR ANY OTHER MATERIAL SUBMITTED TO THE COMPANY OR DURING MY INTERVIEWS, MAY RESULT IN DENIAL OF EMPLOYMENT OR DISCHARGE.

(15) This agreement constitutes the entire and final agreement between the parties and all other prior agreements, arrangements, or understandings, oral or written, are merged into and superseded by the terms of this agreement. I understand that should any part of this agreement be held unenforceable, the enforceability of the remaining provisions shall not be impaired. To the extent the law allows an employee to bring legal action against the Company, I agree to bring that complaint within the time prescribed by law or 6 months from the date of the event forming the basis of my lawsuit, whichever expires first.

(16) In connection with your application, the Company may obtain a consumer report from a consumer reporting agency. This report may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, etc. The report may also contain public record information concerning criminal records from federal, state, and other agencies that maintain these records. It may include information concerning previous record requests and state provided records. I hereby authorize the Company to obtain these and any other investigative consumer reports deemed appropriate on a continuing basis during my employment and agree to hold the Company harmless from any and all liability whatsoever. I hereby authorize FedEx Corporate Services or its designated agents to obtain these reports and make any lawful review of these reports.

I have read this entire Agreement and I thoroughly understand its content.

TYPE APPLICANT'S NAME Jennifer Harris

DATE 4/16/2007

APPLICANT ELECTRONIC
SIGNATURE Jennifer Harris

NOTICE TO APPLICANTS

FedEx Services is required to comply with the provisions of the Immigration Reform and Control Act of 1986. When an applicant is offered employment by FedEx Services, he/she must provide FedEx Services with the papers and documents necessary to prove identity and authorization to work in the United States. This requirement applies to all hires and includes U.S. citizens or nationals, resident aliens, and aliens authorized by federal law or the U.S. Attorney General to be employed in the U.S. Any employment offered by FedEx Services is contingent upon the ability of the candidate to provide the documents required by federal law and to successfully complete all other components of FedEx Service's pre-employment screening process. Failure on the part of the person selected for hire to provide the necessary documentation will result in the automatic withdrawal of the offer of employment.

Company policy requires applicants to undergo pre-employment drug testing to determine the presence of marijuana, cocaine, opiates, phencyclidine (PCP), and amphetamines or a metabolite of these drugs in the applicant's system.

FAIR CREDIT REPORTING ACT DISCLOSURE

In connection with my employment with FedEx Corporate Services, the Company may obtain a consumer report from a consumer reporting agency.

By signing an application for employment with FedEx Corporate Services, you consent to the Company obtaining these reports as necessary.